

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**SOUTHERN DISTRICT OF TEXAS**

Case number (if known): \_\_\_\_\_ Chapter you are filing under:

- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13

☐ Check if this is an  
amended filing

Official Form 101**Voluntary Petition for Individuals Filing for Bankruptcy****12/17**

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
<b>1. Your full name</b>  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	<b>Michael</b> First Name _____ Middle Name _____ <b>Stumps</b> Last Name _____ Suffix (Sr., Jr., II, III) _____	<b>Maichia</b> First Name _____ <b>Jackson</b> Middle Name _____ <b>Stumps</b> Last Name _____ Suffix (Sr., Jr., II, III) _____
<b>2. All other names you have used in the last 8 years</b>  Include your married or maiden names.	First Name _____ Middle Name _____ Last Name _____	First Name _____ Middle Name _____ Last Name _____
<b>3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)</b>	<b>xxx - xx - 9 8 9 3</b> OR <b>9xx - xx - _____</b>	<b>xxx - xx - 3 7 4 9</b> OR <b>9xx - xx - _____</b>

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**About Debtor 1:**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and doing business as names

☒ I have not used any business names or EINs.

Business name

Business name

Business name

EIN

EIN

**5. Where you live**

**22915 Gentle Shadow Dr.**

Number Street

**Hockley TX 77447**  
 City State ZIP Code

**Harris**  
 County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

*Check one:*

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
 (See 28 U.S.C. § 1408.)

**About Debtor 2 (Spouse Only in a Joint Case):**

☒ I have not used any business names or EINs.

Business name

Business name

Business name

EIN

EIN

**If Debtor 2 lives at a different address:**

Number Street

City State ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

*Check one:*

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
 (See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

*Check one:* (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

- 8. How you will pay the fee**
- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
- 9. Have you filed for bankruptcy within the last 8 years?**
- ☐ No
- ☒ Yes.
- District **TX (dismissed 4/1/2019)** When **03/07/2018** Case number **18-31104 13**  
 MM / DD / YYYY
- District **TX (dismissed 12/8/2016)** When **12/08/2016** Case number **15-36352 13**  
 MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 MM / DD / YYYY
- 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**
- ☒ No
- ☐ Yes.
- Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_
- District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
 MM / DD / YYYY if known
- Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_
- District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
 MM / DD / YYYY if known
- 11. Do you rent your residence?**
- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

### Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

- ☒ No. Go to Part 4.  
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

\_\_\_\_\_  
 Name of business, if any

\_\_\_\_\_  
 Number Street

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

\_\_\_\_\_  
 City State ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

- ☒ No. I am not filing under Chapter 11.  
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

### Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

- ☒ No  
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

Where is the property?

\_\_\_\_\_  
 Number Street

\_\_\_\_\_  
 City State ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

## Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

*You must check one:*

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

*You must check one:*

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes**

- 16. What kind of debts do you have?**
- 16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.  
☒ Yes. Go to line 17.
- 16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.  
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.**
- \_\_\_\_\_
- 17. Are you filing under Chapter 7?**
- ☐ No. I am not filing under Chapter 7. Go to line 18.
- ☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☒ No  
☐ Yes
- 18. How many creditors do you estimate that you owe?**
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1-49               | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99              | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999            |  |  |
- 19. How much do you estimate your assets to be worth?**
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000          | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000    | <input type="checkbox"/> \$10,000,001-\$50 million           | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000   | <input type="checkbox"/> \$50,000,001-\$100 million          | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million         | <input type="checkbox"/> More than \$50 billion        |
- 20. How much do you estimate your liabilities to be?**
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Michael Stumps**

Michael Stumps, Debtor 1

Executed on **06/04/2019**

MM / DD / YYYY

**X /s/ Maichia Jackson Stumps**

Maichia Jackson Stumps, Debtor 2

Executed on **06/04/2019**

MM / DD / YYYY

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**If you are not represented by an attorney, you do not need to file this page.**

**X /s/ Christopher Morrison** \_\_\_\_\_

Signature of Attorney for Debtor

Date **06/04/2019**

MM / DD / YYYY

**Christopher Morrison** \_\_\_\_\_

Printed name

**Christopher Todd Morrison, P.C.** \_\_\_\_\_

Firm Name

**1306 Dorothy Street** \_\_\_\_\_

Number Street

**Houston** \_\_\_\_\_

City

**TX** \_\_\_\_\_

State

**77008** \_\_\_\_\_

ZIP Code

Contact phone **(713) 863-1001** \_\_\_\_\_

Email address **attycm2100@yahoo.com** \_\_\_\_\_

**24010250** \_\_\_\_\_

Bar number

**TX** \_\_\_\_\_

State



**Fill in this information to identify your case and this filing:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1.

**22915 Gentle Shadow Dr.**

Street address, if available, or other description

**Hockley TX 77447**  
City State ZIP Code

**Harris**  
County

**Residential homestead**  
**LT 5 BLK 2 BAUER LANDING SEC 1**

**What is the property?**

Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another \_\_\_\_\_

Other information you wish to add about this item, such as local  
property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the  
amount of any secured claims on *Schedule D:*  
*Creditors Who Have Claims Secured by Property.*

**Current value of the  
entire property?**

**\$231,130.00**

**Current value of the  
portion you own?**

**\$231,130.00**

**Describe the nature of your ownership  
interest (such as fee simple, tenancy by the  
entireties, or a life estate), if known.**

**Property Owner**

☒ Check if this is community property  
(see instructions)

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....****\$231,130.00****Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases.*

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No  
☒ Yes

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

3.1. **Who has an interest in the property?** Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Make: Hyundai Check one.  
 Model: Santa Fe ☐ Debtor 1 only  
 Year: 2015 ☐ Debtor 2 only  
 Approximate mileage: 49,512 ☒ Debtor 1 and Debtor 2 only  
 Other information: ☐ At least one of the debtors and another \$19,520.00 \$19,520.00  
**2015 Hyundai Santa Fe** ☒ Check if this is community property (see instructions)

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**  
*Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*

- ☒ No  
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... → **\$19,520.00**

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
 Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

*Examples: Major appliances, furniture, linens, china, kitchenware*

☐ No

☒ Yes. Describe..... **Stove \$125, mcrowave \$25, refrigerator \$100, freezer \$25, dishwasher \$75, kithen utensils and dishware \$65, kitchen table and chairs \$100, washer \$125, dryer \$100, sofa \$150, loveseat \$100, chairs \$130, 2 lamps \$50, 3 beds \$300, dresser \$50, 2 night stands \$50, towels and linens \$135** \$1,705.00

7. **Electronics**

*Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games*

☐ No

☒ Yes. Describe..... **2 tvs \$125, 2 dvd players \$35, computer \$150, printer \$20, 2 alarm clocks \$10, 2 cell phones \$150** \$490.00

8. **Collectibles of value**

*Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles*

☐ No

☒ Yes. Describe..... **Books, pictures, decorations** \$75.00

9. **Equipment for sports and hobbies**

*Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments*

☒ No

☐ Yes. Describe.....

10. **Firearms**

*Examples: Pistols, rifles, shotguns, ammunition, and related equipment*

☒ No

☐ Yes. Describe.....

11. **Clothes**

*Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories*

☐ No

☒ Yes. Describe..... **Clothing, shoes, belts etc** \$365.00

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe..... **Jewelry, rings, earrings, necklaces, watches** **\$415.00**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

☐ No

☒ Yes. Describe..... **2 dogs** **\$5.00**

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....**



**\$3,055.00**

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes..... Cash: ..... **\$22.00**

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes..... Institution name:

17.1. Checking account:	<b>Checking account, Chase Bank xxx-9946</b>	<b>\$101.00</b>
17.2. Checking account:	<b>Checking account, First National Bank xxx-3757</b>	<b>\$17.00</b>
17.3. Checking account:	<b>Checking account, Shell FCU xxx-3974</b>	<b>\$177.00</b>
17.4. Checking account:	<b>Checking account, Shell FCU</b>	<b>\$5.00</b>
17.5. Checking account:	<b>Checking account, Chase Bank xxx-9570</b>	<b>\$49.00</b>
17.6. Savings account:	<b>Savings account, Capital One Bank</b>	<b>\$2.00</b>
17.7. Savings account:	<b>Savings account, Chase Bank xxx-3487</b>	<b>\$125.00</b>
17.8. Savings account:	<b>Savings account, First National Bank xxx-3757</b>	<b>\$4.00</b>
17.9. Savings account:	<b>Savings account, Shell FCU</b>	<b>\$6.00</b>
17.10. Savings account:	<b>Savings account, Barclays Bank xxx-8734</b>	<b>\$59.00</b>

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes..... Institution or issuer name:

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ☒ No  
☐ Yes. Give specific information about them..... Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

- ☒ No  
☐ Yes. Give specific information about them..... Issuer name: \_\_\_\_\_

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No  
☐ Yes. List each account separately. Type of account: \_\_\_\_\_ Institution name: \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No  
☐ Yes..... Institution name or individual: \_\_\_\_\_

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No  
☐ Yes..... Issuer name and description: \_\_\_\_\_

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No  
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No  
☐ Yes. Give specific information about them \_\_\_\_\_

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Local: \_\_\_\_\_

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No  
☐ Yes. Give specific information

Alimony: \_\_\_\_\_  
 Maintenance: \_\_\_\_\_  
 Support: \_\_\_\_\_  
 Divorce settlement: \_\_\_\_\_  
 Property settlement: \_\_\_\_\_

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No  
☐ Yes. Name the insurance company of each policy and list its value.....

Company name: \_\_\_\_\_ Beneficiary: \_\_\_\_\_ Surrender or refund value: \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

- ☒ No  
☐ Yes. Give specific information

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☐ No  
☒ Yes. Describe each claim..... **Michael Stumps vs Highway Transport Logistics, Inc (currently in arbitration) Fell from ladder while at work** **\$1,500,000.00**

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Describe each claim.....

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

**\$1,500,567.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Current value of the  
portion you own?**  
 Do not deduct secured  
claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No  
☐ Yes. Describe.. \_\_\_\_\_

39. Office equipment, furnishings, and supplies

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No  
☐ Yes. Describe.. \_\_\_\_\_

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No  
☐ Yes. Describe.. \_\_\_\_\_

41. Inventory

- ☒ No  
☐ Yes. Describe.. \_\_\_\_\_

42. Interests in partnerships or joint ventures

- ☒ No  
☐ Yes. Describe..... Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_

43. Customer lists, mailing lists, or other compilations

- ☒ No  
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
☐ No  
☐ Yes. Describe..... \_\_\_\_\_

44. Any business-related property you did not already list

- ☒ No  
☐ Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →

**\$0.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Current value of the  
portion you own?**  
 Do not deduct secured  
claims or exemptions.

**47. Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

- ☒ No  
☐ Yes....

\_\_\_\_\_

**48. Crops--either growing or harvested**

- ☒ No  
☐ Yes. Give specific  
information.....

\_\_\_\_\_

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No  
☐ Yes....

\_\_\_\_\_

**50. Farm and fishing supplies, chemicals, and feed**

- ☒ No  
☐ Yes....

\_\_\_\_\_

**51. Any farm- and commercial fishing-related property you did not already list**

- ☒ No  
☐ Yes. Give specific  
information.....

\_\_\_\_\_

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....** →

**\$0.00**

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples:* Season tickets, country club membership

- ☒ No  
☐ Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here.....** →

**\$0.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....	→	<u>\$231,130.00</u>
56. Part 2: Total vehicles, line 5	<u>\$19,520.00</u>	
57. Part 3: Total personal and household items, line 15	<u>\$3,055.00</u>	
58. Part 4: Total financial assets, line 36	<u>\$1,500,567.00</u>	
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	<u>+\$0.00</u>	
62. Total personal property. Add lines 56 through 61.....	<u>\$1,523,142.00</u>	Copy personal property total → <u>+\$1,523,142.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		<u>\$1,754,272.00</u>



**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106C

**Schedule C: The Property You Claim as Exempt**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: <b>Residential homestead</b> <b>LT 5 BLK 2 BAUER LANDING SEC 1</b> Line from <i>Schedule A/B</i> : <u>1.1</u>	<u>\$231,130.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002
Brief description: <b>2015 Hyundai Santa Fe (approx. 49,512 miles)</b> Line from <i>Schedule A/B</i> : <u>3.1</u>	<u>\$19,520.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own  Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>Stove \$125, mcrowave \$25, refrigerator \$100, freezer \$25, dishwasher \$75, kithen utensils and dishware \$65, kitchen table and chairs \$100, washer \$125, dryer \$100, sofa \$150, loveseat \$100, chairs \$130, 2 lamps \$50, 3 beds \$300, dresser \$50, 2 night stands \$50, towels and linens \$135</b> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$1,705.00</u>	<input checked="" type="checkbox"/> <u>\$1,705.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>2 tvs \$125, 2 dvd players \$35, computer \$150, printer \$20, 2 alarm clocks \$10, 2 cell phones \$150</b> Line from <i>Schedule A/B</i> : <u>7</u>	<u>\$490.00</u>	<input checked="" type="checkbox"/> <u>\$490.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Books, pictures, decorations</b> Line from <i>Schedule A/B</i> : <u>8</u>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <u>\$75.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Clothing, shoes, belts etc</b> Line from <i>Schedule A/B</i> : <u>11</u>	<u>\$365.00</u>	<input checked="" type="checkbox"/> <u>\$365.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)
Brief description: <b>Jewelry, rings, earrings, necklaces, watches</b> Line from <i>Schedule A/B</i> : <u>12</u>	<u>\$415.00</u>	<input checked="" type="checkbox"/> <u>\$415.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: <b>2 dogs</b> Line from <i>Schedule A/B</i> : <u>13</u>	<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(11)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

IN RE: **Michael Stumps**  
**Maichia Jackson Stumps**

CASE NO

CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$231,130.00	\$237,418.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$19,520.00	\$20,155.00	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$1,705.00	\$0.00	\$1,705.00	\$1,705.00	\$0.00
7.	Electronics	\$490.00	\$0.00	\$490.00	\$490.00	\$0.00
8.	Collectibles of value	\$75.00	\$0.00	\$75.00	\$75.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$365.00	\$0.00	\$365.00	\$365.00	\$0.00
12.	Jewelry	\$415.00	\$0.00	\$415.00	\$415.00	\$0.00
13.	Non-farm animals	\$5.00	\$0.00	\$5.00	\$5.00	\$0.00
14.	Unlisted pers. and household items- incl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$22.00	\$0.00	\$22.00	\$0.00	\$22.00
17.	Deposits of money	\$545.00	\$0.00	\$545.00	\$0.00	\$545.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

IN RE: **Michael Stumps**  
**Maichia Jackson Stumps**

CASE NO

CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet # 1*

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$1,500,000.00	\$0.00	\$1,500,000.00	\$0.00	\$1,500,000.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops--either growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTALS:</b>		<b>\$1,754,272.00</b>	<b>\$257,573.00</b>	<b>\$1,503,622.00</b>	<b>\$3,055.00</b>	<b>\$1,500,567.00</b>

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

IN RE: **Michael Stumps**  
**Maichia Jackson Stumps**

CASE NO

CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet # 2*

**Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
<b><u>Real Property</u></b>			
(None)			
<b><u>Personal Property</u></b>			
(None)			
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Non-Exempt Property by Item:**

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<b><u>Real Property</u></b>				
(None)				
<b><u>Personal Property</u></b>				
Cash on hand	\$22.00		\$22.00	\$22.00
Savings account, Capital One Bank	\$2.00		\$2.00	\$2.00
Checking account, Chase Bank xxx-9946	\$101.00		\$101.00	\$101.00
Savings account, Chase Bank xxx-3487	\$125.00		\$125.00	\$125.00
Checking account, First National Bank xxx-3757	\$17.00		\$17.00	\$17.00
Savings account, First National Bank xxx-3757	\$4.00		\$4.00	\$4.00
Checking account, Shell FCU xxx-3974	\$177.00		\$177.00	\$177.00
Checking account, Shell FCU	\$5.00		\$5.00	\$5.00
Savings account, Shell FCU	\$6.00		\$6.00	\$6.00
Checking account, Chase Bank xxx-9570	\$49.00		\$49.00	\$49.00
Savings account, Barclays Bank xxx-8734	\$59.00		\$59.00	\$59.00
Michael Stumps vs Highway Transport Logistics, Inc (currently in	\$1,500,000.00		\$1,500,000.00	\$1,500,000.00
<b>TOTALS:</b>	<b>\$1,500,567.00</b>	<b>\$0.00</b>	<b>\$1,500,567.00</b>	<b>\$1,500,567.00</b>

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

IN RE: **Michael Stumps**  
**Maichia Jackson Stumps**

CASE NO

CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet # 3*

<b>Summary</b>	
A. Gross Property Value (not including surrendered property)	<b>\$1,754,272.00</b>
B. Gross Property Value of Surrendered Property	<b>\$0.00</b>
C. Total Gross Property Value (A+B)	<b>\$1,754,272.00</b>
D. Gross Amount of Encumbrances (not including surrendered property)	<b>\$257,573.00</b>
E. Gross Amount of Encumbrances on Surrendered Property	<b>\$0.00</b>
F. Total Gross Encumbrances (D+E)	<b>\$257,573.00</b>
G. Total Equity (not including surrendered property) / (A-D)	<b>\$1,503,622.00</b>
H. Total Equity in surrendered items (B-E)	<b>\$0.00</b>
I. Total Equity (C-F)	<b>\$1,503,622.00</b>
J. Total Exemptions Claimed	<b>\$3,055.00</b>
K. Total Non-Exempt Property Remaining (G-J)	<b>\$1,500,567.00</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

- 2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

*Column A*  
**Amount of claim**  
Do not deduct the value of collateral

*Column B*  
**Value of collateral that supports this claim**

*Column C*  
**Unsecured portion**  
If any

2.1

**American Credit Acceptance**

Creditor's name

**961 E Main St**

Number Street

Describe the property that secures the claim:

**2015 Hyundai Santa Fe****\$20,155.00****\$19,520.00****\$635.00**

**Spartanburg SC 29302**

City State ZIP Code

**Who owes the debt?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☒ Check if this claim relates to a community debt

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☒ Other (including a right to offset)

**Automobile**

Date debt was incurred **12/21/2016** Last 4 digits of account number **1 0 0 1**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$20,155.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 1:****Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

*Column A*  
**Amount of claim**  
 Do not deduct the value of collateral

*Column B*  
**Value of collateral that supports this claim**

*Column C*  
**Unsecured portion**  
 If any

2.2

Describe the property that secures the claim:

**\$237,418.00****\$231,130.00****\$6,288.00****Loandepot.com, Llc**

Creditor's name

**4800 N. Scottsdale Road**

Number Street

**22915 Gentle Shadow Dr.****Scottsdale AZ 85251**

City State ZIP Code

**Who owes the debt?** Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this claim relates to a community debt**As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)**FHA Real Estate Mortgage**Date debt was incurred **12/23/2014**Last 4 digits of account number **0 4 0 2**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$237,418.00**

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

**\$257,573.00**



**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims against you?**

- ☒ No. Go to Part 2.  
☐ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1			
Priority Creditor's Name	Last 4 digits of account number		
Number Street	When was the debt incurred?		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
Is the claim subject to offset?	<input type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

**\$7,747.00**

4.1

**Aeroflex**

Nonpriority Creditor's Name

**3165 Sweeten Creek Rd**

Number Street

**Asheville**

**NC 28803**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Last 4 digits of account number** \_ \_ \_ \_

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

4.2

**Affinity Med Assoc**

Nonpriority Creditor's Name

**3 Maryland Farms Ste 250**

Number Street

**Brentwood**

**TN 37027-5053**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Last 4 digits of account number** \_ \_ \_ \_

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

**\$149.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$213.00**

4.3

**Affirm Inc**

Nonpriority Creditor's Name  
**650 California St Fl 12**  
 Number Street

**San Francisco CA 94108**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.4

**America Profit Recovery**

Nonpriority Creditor's Name  
**34405 W. 12 Mile Rd Ste 379**  
 Number Street

**Farmington MI 48331**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.5

**Antwar Harrell**

Nonpriority Creditor's Name  
**11550 Louetta Ste 1200**  
 Number Street

**Houston TX 77070**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **B 4 K S**When was the debt incurred? **02/2019**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Unsecured**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Outstanding debt**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Outstanding debt**

**\$231.00****\$408.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.6

**\$125.00****Bank Pass**

Nonpriority Creditor's Name

**Po Box 30069**

Number Street

**Austin TX 78703**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

4.7

**\$583.00****Capital One Bank Usa N**

Nonpriority Creditor's Name

**Po Box 30281**

Number Street

**Salt Lake City UT 84130**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0 3 1 9When was the debt incurred? 01/2019

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card**

4.8

**\$425.00****Cb Indigo/gf**

Nonpriority Creditor's Name

**Po Box 4499**

Number Street

**Beaverton OR 97076**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 5 1 9 9When was the debt incurred? 01/2019

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$0.00**

4.9

**Comenitybank/palaisryl**

Nonpriority Creditor's Name

**Po Box 182789**

Number Street

Last 4 digits of account number 0 9 0 2When was the debt incurred? 11/23/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Columbus OH 43218**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account****\$624.00**

4.10

**Coram, Inc.**

Nonpriority Creditor's Name

**PO Box 809271**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Chicago IL 60680**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt****\$581.00**

4.11

**Credit One Bank Na**

Nonpriority Creditor's Name

**Po Box 98872**

Number Street

Last 4 digits of account number 2 2 5 2When was the debt incurred? 12/2018

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Las Vegas NV 89193**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$1,085.00**

4.12

**Cypress Dentistry Group**

Nonpriority Creditor's Name

**9727 Barker Cypress Rd Ste 600**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Cypress****TX****77433**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

4.13

**First Premier Bank**

Nonpriority Creditor's Name

**3820 N Louise Ave**

Number Street

Last 4 digits of account number 5 8 0 8When was the debt incurred? 04/12/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sioux Falls****SD****57107**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card****\$421.00**

4.14

**First Premier Bank**

Nonpriority Creditor's Name

**3820 N Louise Ave**

Number Street

Last 4 digits of account number 1 4 8 7When was the debt incurred? 12/2018

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sioux Falls****SD****57107**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card****\$350.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$75.00**

4.15

**Gentle Dental Care**

Nonpriority Creditor's Name  
**18252 FM 1488 St 120**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Magnolia TX 77354**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

4.16

**Gevalia**

Nonpriority Creditor's Name  
**PO Box 6276**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Dover DE 19905**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

4.17

**Harold Willis**

Nonpriority Creditor's Name  
**605 Hoderrieth Blvd**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Tomball TX 77375**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt****\$38.00**



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.18

**\$151.00****Hometown Pest Defense**

Nonpriority Creditor's Name

**10920 W Sam Houston Pkwy Ste 500**

Number Street

**Houston TX 77064**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.19

**\$1,285.00****Houston Methodist**

Nonpriority Creditor's Name

**PO Box 3133**

Number Street

**Houston TX 77253-3133**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.20

**\$17,855.00****IRS**

Nonpriority Creditor's Name

**Centralized Insolvency Operation**

Number Street

**P.O. Box 7346**

**Philadelphia PA 19101-7346**  
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical bill**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Income Tax**



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.21

**\$28.00****Memorial Hermann**

Nonpriority Creditor's Name

**PO Box 4370**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical bill****Houston TX 77210-4370**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.22

**\$450.00****Methodist Emergency Hopsital**

Nonpriority Creditor's Name

**27560 US 290 Frontage Rd**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical bill****Cypress TX 77443**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.23

**\$219.00****Metram Rao MD**

Nonpriority Creditor's Name

**17200 Red Oak Dr #107**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt****Houston TX 77090**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.24

**\$68,948.00****Nelnet Lns**

Nonpriority Creditor's Name

**Po Box 1649**

Number Street

**Denver****CO 80201**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number 1 5 9 9When was the debt incurred? 06/2006**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Educational**

4.25

**\$2,013.00****Portfolio Recov Assoc**

Nonpriority Creditor's Name

**120 Corporate Blvd Ste 1**

Number Street

**Norfolk****VA 23502**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number 7 0 2 2When was the debt incurred? 06/19/2017**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Factoring Company Account**

4.26

**\$1,442.00****Portfolio Recov Assoc**

Nonpriority Creditor's Name

**120 Corporate Blvd Ste 1**

Number Street

**Norfolk****VA 23502**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number 1 1 8 2When was the debt incurred? 06/19/2017**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Factoring Company Account**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.27

**\$98.00****Prestine OB Gyn Care**

Nonpriority Creditor's Name

**13523 Hargrave Rd**

Number Street

**Houston TX 77070**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.28

**\$1,396.00****Radiant**

Nonpriority Creditor's Name

**PO Box 1183**

Number Street

**Lac DU Flameau WI 54538**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.29

**\$63.00****Receivable Solution**

Nonpriority Creditor's Name

**PO Box 669**

Number Street

**Natchez MS 39121**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.30

**\$0.00****Sears/cbna**

Nonpriority Creditor's Name

**Po Box 6217**

Number Street

Last 4 digits of account number 8 3 1 9When was the debt incurred? 06/1990

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sioux Falls****SD 57117**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account**

4.31

**\$0.00****Seventh Avenue**

Nonpriority Creditor's Name

**1112 7th Ave**

Number Street

Last 4 digits of account number 0 5 7 0When was the debt incurred? 12/12/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Monroe****WI 53566**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account**

4.32

**\$1,500.00****Stella Dental**

Nonpriority Creditor's Name

**7160 Barker Cypress Rd Suite E**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Cypress****TX 77443**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$58.00**

4.33

**Synco/chevron**

Nonpriority Creditor's Name

**P.o Box 965015**

Number Street

Last 4 digits of account number 1 0 0 8When was the debt incurred? 11/25/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Orlando FL 32896**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account**

4.34

**Tbom/total Crd**

Nonpriority Creditor's Name

**Po Box 85710**

Number Street

Last 4 digits of account number 0 5 8 1When was the debt incurred? 11/12/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Sioux Falls SD 57118**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card**

4.35

**Texas Workforce Commission**

Nonpriority Creditor's Name

**PO Box 149080**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Austin TX 78714-9080**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt****\$392.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$73.00**

4.36

**TX Tag**

Nonpriority Creditor's Name

**PO Box 650749**

Number Street

**Dallas TX 75265-0749**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.37

**Verizon Wireless**

Nonpriority Creditor's Name

**Po Box 650051**

Number Street

**Dallas TX 75265**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.38

**Webbank/fingerhut**

Nonpriority Creditor's Name

**6250 Ridgewood Road**

Number Street

**Saint Cloud MN 56303**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**Last 4 digits of account number 0 0 0 1When was the debt incurred? 07/26/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Unknown Loan Type**Last 4 digits of account number 6 2 4 7When was the debt incurred? 07/27/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account****\$0.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.39

**\$0.00****Webbnk/fhut**

Nonpriority Creditor's Name

**6250 Ridgewood Road**

Number Street

Last 4 digits of account number 6 3 8 7When was the debt incurred? 10/01/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Saint Cloud****MN 56303**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account****\$652.00**

4.40

**Wells Fargo Bank**

Nonpriority Creditor's Name

**Credit Bureau Dispute Resoluti**

Number Street

Last 4 digits of account number 6 8 4 7When was the debt incurred? 11/24/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Des Moines****IA 50306**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Outstanding debt**



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**A-1 Premium Acceptance**

Name

**8304 Wornall Rd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Kansas City**

City

**MO**

State

**64114**

ZIP Code

**ABC Home & Commercial Services**

Name

**PO Box 670389**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas**

City

**TX**

State

**75267-0389**

ZIP Code

**Ace Cash Express**

Name

**1231 Greenway Plza #700**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Irving**

City

**TX**

State

**75038**

ZIP Code

**Advance America**

Name

**5528 Airline**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

City

**TX**

State

**77076**

ZIP Code

**Advance America**

Name

**12280 NW Freeway, Ste. E**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

City

**TX**

State

**77040**

ZIP Code



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Akron Billing**

Name  
**2620 Ridewood Rd Ste 300**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Akron** **OH** **44313-3527**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Alliance One**

Name  
**PO Box 3100**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
**Collecting for -** ☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Southeastern** **PA** **19398-3100**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Alliance One**

Name  
**PO Box 5818**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Trenton** **NJ** **08638-0818**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**AMCA Collection Agency**

Name  
**2269 S Saw Mill River Rd**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Elmsford** **NY** **10523**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**America's Best**

Name  
**PO Box 934802**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Atlanta** **GA** **31193-4802**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Americollect**

Name  
**1851 S. Alverno Rd**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Manitowoc** **WI** **54221**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**ARM Solutions Inc**

Name

**PO Box 3666**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Camarillo**

**CA**

**93011-3666**

City

State

ZIP Code

**Bastion Funding TX LLC**

Name

**2802 N. Shepherd Dr Ste 200**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

**TX**

**77008**

City

State

ZIP Code

**Beckett & Lee**

Name

**PO Box 3001**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Malvern**

**PA**

**19355-3001**

City

State

ZIP Code

**Bonded Collections of Tucson**

Name

**5447 5th St Ste 110**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tucson**

**AZ**

**85711-2345**

City

State

ZIP Code

**Capital Med Management Group**

Name

**PO Box 4897**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

**TX**

**77210-4897**

City

State

ZIP Code

**Capital One**

Name

**PO Box 85184**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Richmond**

**VA**

**23285-5184**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Cash Factory USA**

Name

**6965 Rainbow Blvd Ste 130**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Las Vegas**

**NV**

**89118**

City

State

ZIP Code

**Cash Store**

Name

**1901 Gateway Dr., Ste 200**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Irving**

**TX**

**75038**

City

State

ZIP Code

**Cashnet USA**

Name

**200 W. Jackson Blvd. 14th Floor**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Chicago**

**IL**

**60606-6941**

City

State

ZIP Code

**Castle Dental**

Name

**6831 Highway 6 North**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

**TX**

**77084**

City

State

ZIP Code

**Castle Dental**

Name

**PO Box 52858**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Irvine**

**CA**

**92619**

City

State

ZIP Code

**CBCS**

Name

**250 East Towne St**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Columbus**

**OH**

**43215**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****CBHV**

Name

**PO Box 831**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Newburgh****NY****12551-0831**

City

State

ZIP Code

**CBHV**

Name

**PO Box 3495**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Toledo****OH****43607**

City

State

ZIP Code

**Check n Go**

Name

**7755 Montgomery Rd., Ste 400**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Cincinnati****OH****45236**

City

State

ZIP Code

**Clinical Pathology Lab.**

Name

**PO Box 141669**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Austin****TX****78714-1669**

City

State

ZIP Code

**Cognical Inc**

Name

**151 West 25th St 9th Floor**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**New York****NY****10001**

City

State

ZIP Code

**Cons**

Name

**PO Box 815867**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas****TX****75234-5867**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Convergent Outsourcing**

Name

**Po Box 9004**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Renton**

**WA**

**98057**

City

State

ZIP Code

**Cottonwood Financial**

Name

**1901 Gateway Dr., Ste 200**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Irving**

**TX**

**75038**

City

State

ZIP Code

**Credit Collection Serv**

Name

**725 Canton Street**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Norwood**

**MA**

**02062**

City

State

ZIP Code

**Credit Collection Services**

Name

**PO Box 61295**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Savanah**

**GA**

**31420-1295**

City

State

ZIP Code

**CSG Nationwide Inc**

Name

**PO Box 21031**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tulsa**

**OK**

**74121-1031**

City

State

ZIP Code

**Cypress Dental Group**

Name

**17814 Spring Cypress Road**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Outstanding debt**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Cypress**

**TX**

**77429**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Dial Adjustment Bureau/A Division of**

Name

**960 Macarthur Blvd.**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Mahwah****NJ****07495-0011**

City

State

ZIP Code

**Diversified Consultants, Inc.**

Name

**PO Box 551268**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Jacksonville****FL****32255**

City

State

ZIP Code

**Dt Credit Co**

Name

**PO Box 29018**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Phoenix****AZ****85038-9018**

City

State

ZIP Code

**Dynamic Recovery**

Name

**2629 Dickerson Pk**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Carrollton****TX****75007**

City

State

ZIP Code

**Dynamic Recovery Services**

Name

**4101 McEwen Rd Ste 150**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Farmers Branch****TX****75244**

City

State

ZIP Code

**Emblem Credit Card**

Name

**16 McLeland Road**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Saint Cloud****MN****56303**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****FC&A**

Name  
**103 Clover Green**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Peachtree** **GA** **30269**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Financial Corportation of America**

Name  
**PO Box 203600**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Austin** **TX** **78720-3600**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**First Access**

Name  
**PO Box 5220**  
 Number Street  
**Sioux Falls, SD 5117**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**First Cash Advance**

Name  
**21327 North Freeway, Suite B**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Spring** **TX** **77388**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**First Cash Financial Services**

Name  
**690 East Lamar Blvd., Suite 400**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
**Outstanding debt** ☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Arlington** **TX** **76011**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**First National Collection Bureau, Inc**

Name  
**610 Waltham Way**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Sparks** **NV** **89434**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Genesis FS Card Services**

Name

**PO Box 23039**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Columbus**

**GA**

**31902**

City

State

ZIP Code

**GEXA Energy**

Name

**PO Box 660100**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas**

**TX**

**75266-0100**

City

State

ZIP Code

**GEXA Energy**

Name

**20 Greenway Plaza, Ste 600**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Utility Bill**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

**TX**

**77046**

City

State

ZIP Code

**Global Receivables Solutions, Inc.**

Name

**PO Box 790113**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**St. Louis**

**MO**

**63179-0113**

City

State

ZIP Code

**Harvest Associates, Inc.**

Name

**PO box 204778**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Collecting for -Houston Methodist**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Augusta**

**GA**

**30917**

City

State

ZIP Code

**HCTRA- Violations**

Name

**Dept 11**

Number Street

**PO Box 4440**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

**TX**

**77210-4440**

City

State

ZIP Code



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Houston Radiology Assoc.**

Name

**PO Box 4346 Dept. 488**

Number Street

**Houston, TX 772104346**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims**Medical bill**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City State ZIP Code

**Hughes, Waters, & Askanase LLP**

Name

**1201 Louisiana, 28th Floor**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston TX 77002**  
 City State ZIP Code

**Id & TMS PA**

Name

**1025 Louetta Rd #B**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston TX 77070-1149**  
 City State ZIP Code

**Inpatient Consultants of TX**

Name

**4545 Post Oak Place Dr #130**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston TX 77027**  
 City State ZIP Code

**Integrity Funding**

Name

**84 Villa Rd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Greenville SC 29615**  
 City State ZIP Code

**IPC of Texas**

Name

**PO Box 92729**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Los Angeles CA 90009**  
 City State ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****IRS**

Name

**PO Box 1214**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Charlotte****NC****28201**

City

State

ZIP Code

**IRS**

Name

**1919 Smith Street, STOP 5024 HOU**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77002**

City

State

ZIP Code

**JC Christensen & Ass.**

Name

**PO Box 1335**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Buffalo****NY****14240-1335**

City

State

ZIP Code

**JC Christensen & Assoc**

Name

**PO Box 519**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Sauk Rapids****MN****56379-0519**

City

State

ZIP Code

**Juan R Amell MD**

Name

**PO Box 4897**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77210**

City

State

ZIP Code

**Kelsey Seybold**

Name

**2727 W. Holcombe Blvd 4th Fl**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77025**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Kelsey Seybold Clinic**

Name

**8900 Lakes at 610 Dr**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77054**

City

State

ZIP Code

**LCA Collections**

Name

**PO Box 2240**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Burlington****NC****27216-2240**

City

State

ZIP Code

**Life Watch**

Name

**10255 W Higgins Rd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Rosemont****IL****60018-5606**

City

State

ZIP Code

**Linebarger, Goggan, Blair et al**

Name

**1301 Travis St., Ste 145**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77002**

City

State

ZIP Code

**Loan Star Heart and Vas Cntr**

Name

**425 Holderrieth Blvd Ste 212**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball****TX****77375**

City

State

ZIP Code

**Lonestar Radiology**

Name

**800 Rockmead Dr. #210**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Kingwood****TX****77339**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**McCarthy, Burgess & Wolff**

Name

**26000 Cannon Rd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Cleveland**

**OH**

**44146**

City

State

ZIP Code

**Memorial Herman Health Care ER**

Name

**PO Box 842355**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas**

**TX**

**75284-2355**

City

State

ZIP Code

**Memorial Pathology Cons**

Name

**PO Box 910**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Greenville**

**TX**

**75403-0910**

City

State

ZIP Code

**Memorial Radiology Associates**

Name

**PO Box 200439**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

**TX**

**77216-0439**

City

State

ZIP Code

**Methodist Pathology Assoc**

Name

**PO Box 4701**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston**

**TX**

**77210**

City

State

ZIP Code

**Michael G. Casagrande MD PA**

Name

**506 Graham Dr Ste 290**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball**

**TX**

**77375**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Mid America Bank**

Name

**PO Box 89210**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Sioux Falls****SD****57109**

City

State

ZIP Code

**Midland Credit Management, Inc.**

Name

**2365 Northside Dr. Suite 300**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**San Diego****CA****92108**

City

State

ZIP Code

**Midland Credit Management, Inc.**

Name

**Dept 8870**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Los Angeles****CA****90084-8870**

City

State

ZIP Code

**Millen Phys Assoc Primary Care**

Name

**451 Kingwood Med Dr Suite 200**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Kingwood****TX****77339**

City

State

ZIP Code

**Miral Patel**

Name

**11550 Louetta Ste 1200**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77070**

City

State

ZIP Code

**Mohsen Arani**

Name

**506 Graham Dr #120**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball****TX****77375**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****National Asset Recovery Serv.**

Name

**PO Box 701**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Chesterfield****MO****63006-0701**

City

State

ZIP Code

**National Credit Adjusters**

Name

**PO Box 3023**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims**Collecting for -**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Hutchinson****KS****67504**

City

State

ZIP Code

**National Vision Inc**

Name

**PO Box 934802**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Atlanta****GA****31193**

City

State

ZIP Code

**Nelnet Loan Services**

Name

**3015 S Parker Rd Ste 400**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Aurora****CO****80014**

City

State

ZIP Code

**Nelnet Loan Services**

Name

**PO Box 2970**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Omaha****NE****68103-2970**

City

State

ZIP Code

**Neptune Emerg. Services**

Name

**PO Box 4804**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77210-4804**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****North Shore Agency**

Name

**PO Box 8999**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Westbury****NY****11590-5591**

City

State

ZIP Code

**NPAS Solutions, LLC**

Name

**PO Box 33188**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Louisville****KY****40232**

City

State

ZIP Code

**Orkin Pest Control**

Name

**13022 Kathy Lane**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Cypress****TX****77429-5100**

City

State

ZIP Code

**PFS Group**

Name

**PO Box 4288**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77210-4288**

City

State

ZIP Code

**PFS Group**

Name

**2600 North Loop West, Ste 150**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims**Medical bill**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77092**

City

State

ZIP Code

**Phoenix Financial Services LLC**

Name

**PO Box 26580**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Indianapolis****IN****46226-0580**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Physicians Group of the Woodlands**

Name

**PO Box 14099**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Belfast****ME****04915**

City

State

ZIP Code

**Professional Acct Serv.**

Name

**PO Box 188**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Brentwood****TN****37024-0188**

City

State

ZIP Code

**Professional Bureau of Collections**

Name

**of Maryland, Inc.**

Number Street

**PO Box 628**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Elk Grove****CA****95759-0628**

City

State

ZIP Code

**Progressive Leasing**

Name

**10619 S Jordan Gateway Ste 100**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**S Jordan****UT****84095**

City

State

ZIP Code

**Publishers Clearinghouse**

Name

**382 Channel Dr**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Port Washington****NY****11050**

City

State

ZIP Code

**Quest Diagnostice Inc.**

Name

**PO Box 740698**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Cincinnati****OH****45274-0698**

City

State

ZIP Code



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Quest Diagnostics, Inc.**

Name

**P.O. Box 41652**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Philadelphia****PA****19101-1652**

City

State

ZIP Code

**Red Oak Cardiovascular**

Name

**17200 Red Oak Dr. #107**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77090**

City

State

ZIP Code

**ReflexPO Box 3220**

Name

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Buffalo****NY****14240**

City

State

ZIP Code

**Rise Credit**

Name

**4150 International Plaza Ste 400**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Fort Worth****TX****76109**

City

State

ZIP Code

**Rodale Books**

Name

**400 South 10th Street**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims**Outstanding debt**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Emmaus****PA****18098**

City

State

ZIP Code

**Rollins Service Bureau**

Name

**PO Box 13230**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Atlanta****GA****30324**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Rosenthal, Morgan & Thomas**

Name

**12747 Olive Blvd. Suite 375**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**St Louis****MO****63141**

City

State

ZIP Code

**Safeco Insurance Co**

Name

**PO Box 5687**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Denver****CO****80217**

City

State

ZIP Code

**Sentry Credit Inc**

Name

**2809 Grand Ave.**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Everett****WA****98201**

City

State

ZIP Code

**Seventh Ave**

Name

**PO Box 2804**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Monroe****WI****53566**

City

State

ZIP Code

**Shop Now**

Name

**PO Box 2852**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Monroe****WI****53566**

City

State

ZIP Code

**Skoro Enterprise**

Name

**PO Box 670221**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas****TX****75267**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Snap Finance**

Name

**PO Box 26561**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Salt Lake City****UT****84126**

City

State

ZIP Code

**Specialized Collection System, Inc**

Name

**PO Box 441508**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77244-1508**

City

State

ZIP Code

**Speedy Cash**

Name

**8400 E. 32nd Stree N.**

Number Street

**Wichita, KS67226**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City

State

ZIP Code

**Sunrise Credit Services**

Name

**P.O Box 9100**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Farmingdale****NY****11735-9100**

City

State

ZIP Code

**Surgical Advanced Specialty Center**

Name

**455 School St. Suite 10**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball****TX****77375**

City

State

ZIP Code

**Synchrony Bank**

Name

**PO Box 960061**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Orlando****FL****32896-0061**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Tejas Pathology**

Name

**PO Box 1568**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball**

**TX**

**77377**

City

State

ZIP Code

**The Heights of Tomball**

Name

**27840 Johnson Rd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball**

**TX**

**77375**

City

State

ZIP Code

**T-Mobile**

Name

**PO Box 742596**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Cincinnati**

**OH**

**45274**

City

State

ZIP Code

**Tomball Clinical Lab**

Name

**PO Box 2050**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Nederland**

**TX**

**77267**

City

State

ZIP Code

**Tomball Clinical Lab**

Name

**PO Box 1400**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Medical bill**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Greenville**

**TX**

**75403**

City

State

ZIP Code

**Tomball Reg Emerg Phys**

Name

**605 Holderrieth Blvd**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball**

**TX**

**77375**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Tomball Regional Hospital**

Name

**75 Remittance Dr Dept 6479**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Chicago****IL****60675-6479**

City

State

ZIP Code

**Tomball Regional Med Center**

Name

**PO Box 845933**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas****TX****75284-5933**

City

State

ZIP Code

**Total Customers Services**

Name

**1510 East 112nd St**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Burnsville****MN****55337**

City

State

ZIP Code

**Transworld System**

Name

**1611 West Country Rd B, Ste. 307**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims**Outstanding debt**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Roseville****MN****55113**

City

State

ZIP Code

**Transworld Systems**

Name

**507 Prudential Road**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims**Utility Bill**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Horsham****PA****19044**

City

State

ZIP Code

**Trepa, PA**

Name

**PO Box 25131**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Fort Worth****TX****76124-2131**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Tri State Funding, LLC**

Name  
**PO Box 561183**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Dallas TX 75356**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Tri-State Adjustments**

Name  
**PO Box 3219**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**La Crosse WI 54602**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Trugreen**

Name  
**PO Box 78611**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Phoenix AZ 85062-8611**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**TWC Revenue and Trust Management**

Name  
**PO Box 149352**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Austin TX 78714**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Uncle Warbucks**

Name  
**P.O. Box 1469**  
 Number Street  
**Kahnawake, Quebec J0L 1B0**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Uncle Warbucks Loans**

Name  
**20 3 NE Front St Ste 101**  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Milford Kent DE 19963**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Unified Asset Solutions**

Name

**PO Box 1098**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims**Outstanding debt**☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Buffalo****NY****14226**

City

State

ZIP Code

**United Recovery Systems Inc**

Name

**PO Box 722929**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77272-2929**

City

State

ZIP Code

**United Recovery Systems, Inc.**

Name

**3100 S. Gessner, Ste 400**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Houston****TX****77063**

City

State

ZIP Code

**Verizon Wireless**

Name

**500 Tech Dr Ste 550**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Wedon Spring****MO****63304**

City

State

ZIP Code

**Verizon Wireless**

Name

**PO Box 660108**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Dallas****TX****75266-0108**

City

State

ZIP Code

**Virtuoso Sourcing Group**

Name

**PO Box 5818**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Denver****CO****80217**

City

State

ZIP Code

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Wellshire Financial Services**

Name

**27704 State Highway 249**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Tomball**

**TX**

**77375**

City

State

ZIP Code

**Willowbrook Cardiovascular Assoc**

Name

**PO Box 202530**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Austin**

**TX**

**78720**

City

State

ZIP Code



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$0.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$110,826.00</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$110,826.00</u>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106H

**Schedule H: Your Codebtors**

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No  
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.  
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No  
☒ Yes

In which community state or territory did you live? **Texas** Fill in the name and current address of that person.

**Maichia Jackson Stumps**

Name of your spouse, former spouse, or legal equivalent

**22915 Gentle Shadow Dr.**

Number Street

**Hockley**

City

**TX**

State

**77447**

ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: **Your codebtor**

Column 2: **The creditor to whom you owe the debt**

Check all schedules that apply:

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>	<b>Stumps</b>
	First Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia Jackson</b>	<b>Stumps</b>
	First Name	Last Name
United States Bankruptcy Court for the:	<b>SOUTHERN DISTRICT OF TEXAS</b>	
Case number (if known)		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status****Debtor 1**

- ☐ Employed  
☒ Not employed

**Occupation****Retired****Employer's name****Employer's address**

Number Street

City

State Zip Code

**Debtor 2 or non-filing spouse**

- ☒ Employed  
☐ Not employed

**Manager Customer Service****The Sutherland Global Services, Inc.****1160 Pittsford**

Number Street

**Pittsford****NY****14534**

City

State Zip Code

How long employed there?

**3 years****Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	<b>\$0.00</b>	<b>\$3,392.13</b>
<b>3. Estimate and list monthly overtime pay.</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>4. Calculate gross income.</b> Add line 2 + line 3.	<b>\$0.00</b>	<b>\$3,392.13</b>

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ..... → 4.	<b>\$0.00</b>	<b>\$3,392.13</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. <b>\$0.00</b>	<b>\$365.38</b>
5b. Mandatory contributions for retirement plans	5b. <b>\$0.00</b>	<b>\$0.00</b>
5c. Voluntary contributions for retirement plans	5c. <b>\$0.00</b>	<b>\$0.00</b>
5d. Required repayments of retirement fund loans	5d. <b>\$0.00</b>	<b>\$0.00</b>
5e. Insurance	5e. <b>\$0.00</b>	<b>\$427.61</b>
5f. Domestic support obligations	5f. <b>\$0.00</b>	<b>\$0.00</b>
5g. Union dues	5g. <b>\$0.00</b>	<b>\$0.00</b>
5h. Other deductions. Specify: _____	5h. + <b>\$0.00</b>	<b>\$0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <b>\$0.00</b>	<b>\$792.99</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. <b>\$0.00</b>	<b>\$2,599.14</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <b>\$0.00</b>	<b>\$0.00</b>
8b. Interest and dividends	8b. <b>\$0.00</b>	<b>\$0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <b>\$0.00</b>	<b>\$0.00</b>
8d. Unemployment compensation	8d. <b>\$0.00</b>	<b>\$0.00</b>
8e. Social Security	8e. <b>\$1,643.00</b>	<b>\$0.00</b>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <b>\$0.00</b>	<b>\$0.00</b>
8g. Pension or retirement income	8g. <b>\$0.00</b>	<b>\$0.00</b>
8h. Other monthly income. Specify: <b>Long term disability</b>	8h. + <b>\$808.00</b>	<b>\$0.00</b>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <b>\$2,451.00</b>	<b>\$0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <b>\$2,451.00</b>	<b>\$2,599.14</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + <b>\$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12. <b>\$5,050.14</b>	<b>\$5,050.14</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input checked="" type="checkbox"/> No. <b>None.</b> <input type="checkbox"/> Yes. Explain: _____		<b>Combined monthly income</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>	<b>Stumps</b>
	First Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia Jackson</b>	<b>Stumps</b>
	First Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>		
Case number (if known)		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**☒ No☐ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

**Your expenses****4. The rental or home ownership expenses for your residence.**  
Include first mortgage payments and any rent for the ground or lot.4. **\$1,789.00****If not included in line 4:**

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \_\_\_\_\_

4b. \_\_\_\_\_

4c. **\$125.00**

4d. **\$25.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**Your expenses**

<b>5. Additional mortgage payments for your residence</b> , such as home equity loans	5.	_____
<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a.	<u>\$335.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$225.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$336.00</u>
6d. Other. Specify: _____	6d.	_____
<b>7. Food and housekeeping supplies</b>	7.	<u>\$575.00</u>
<b>8. Childcare and children's education costs</b>	8.	_____
<b>9. Clothing, laundry, and dry cleaning</b>	9.	<u>\$135.00</u>
<b>10. Personal care products and services</b>	10.	<u>\$75.00</u>
<b>11. Medical and dental expenses</b>	11.	<u>\$285.00</u>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$365.00</u>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	<u>\$40.00</u>
<b>14. Charitable contributions and religious donations</b>	14.	_____
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<u>\$132.00</u>
15d. Other insurance. Specify: <u>Additional flood insurance</u>	15d.	<u>\$39.00</u>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1 <b>Vehicle payment</b>	17a.	<u>\$518.00</u>
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: <u>Food and Care for Pets</u>	17c.	<u>\$45.00</u>
17d. Other. Specify: _____	17d.	_____
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	_____
<b>19. Other payments you make to support others who do not live with you.</b> Specify: _____	19.	_____

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: \_\_\_\_\_ 21. **+** \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a. <b>\$5,044.00</b>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <b>\$5,044.00</b>

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. <b>\$5,050.14</b>
23b. Copy your monthly expenses from line 22c above.	23b. <b>-\$5,044.00</b>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. <b>\$6.14</b>

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here:

**None.**



**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106Sum

**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets****Your assets**

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)1a. Copy line 55, Total real estate, from Schedule A/B..... **\$231,130.00**1b. Copy line 62, Total personal property, from Schedule A/B..... **\$1,523,142.00**1c. Copy line 63, Total of all property on Schedule A/B..... **\$1,754,272.00****Part 2: Summarize Your Liabilities****Your liabilities**

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$257,573.00**3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$0.00**3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... **+** **\$110,826.00****Your total liabilities****\$368,399.00****Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)Copy your combined monthly income from line 12 of Schedule I..... **\$5,050.14**5. *Schedule J: Your Expenses* (Official Form 106J)Copy your monthly expenses from line 22c of Schedule J..... **\$5,044.00**

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

#### Part 4: Answer These Questions for Administrative and Statistical Records

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

**\$4,199.00**

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

**Total claim**

**From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	<b>\$0.00</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X /s/ Michael Stumps** \_\_\_\_\_

Michael Stumps, Debtor 1

Date **06/04/2019**  
MM / DD / YYYY

**X /s/ Maichia Jackson Stumps** \_\_\_\_\_

Maichia Jackson Stumps, Debtor 2

Date **06/04/2019**  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 107

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- ☒ Married  
☐ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No  
☒ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

## Part 2: Explain the Sources of Your Income

### 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$0.00</b> <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the last calendar year:</b> (January 1 to December 31, <u>2018</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$0.00</b> <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2017</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$0.00</b> <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

### 5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>		
<b>For the last calendar year:</b> (January 1 to December 31, <u>2018</u> ) YYYY		
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2017</u> ) YYYY	<b>Unemployment comp</b>	<b>\$10,382.00</b>

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<b>Loandepot.com, Llc</b> Creditor's name		<b>\$1,789.00</b>	<b>\$237,418.00</b>	<input checked="" type="checkbox"/> Mortgage
<b>4800 N. Scottsdale Road</b> Number Street	<b>Monthly</b>			<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____
<b>Scottsdale</b> City	<b>AZ</b> State	<b>85251</b> ZIP Code		
<b>Amer Cr Acpt</b> Creditor's name		<b>\$518.00</b>	<b>\$20,155.00</b>	<input type="checkbox"/> Mortgage
<b>961 E Main St</b> Number Street	<b>Monthly</b>			<input checked="" type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____
<b>Spartanburg</b> City	<b>SC</b> State	<b>29302</b> ZIP Code		

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**  
*Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.*

- ☒ No  
☐ Yes. List all payments to an insider.

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments that benefited an insider.

#### **Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**  
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No  
☐ Yes. Fill in the details.

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.  
☐ Yes. Fill in the information below.

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- ☒ No  
☐ Yes. Fill in the details.

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

- ☒ No  
☐ Yes

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No  
☐ Yes. Fill in the details.

### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No  
☒ Yes. Fill in the details.

**Christopher Todd Morrison, P.C.**

Person Who Was Paid

**1306 Dorothy Street**

Number Street

Description and value of any property transferred

Date payment  
or transfer was  
made

Amount of  
payment

**05/06/2019**

**\$999.00**

**Houston**

**TX**

**77008**

City

State

ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred

Date payment  
or transfer was  
made

Amount of  
payment

**Abacus**

Person Who Was Paid

Number Street

**5/2019**

**\$25.00**

**Houston**

**TX**

City

State

ZIP Code

Email or website address

Person Who Made the Payment, if Not You



Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No  
☐ Yes. Fill in the details.

### Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No  
☒ Yes. Fill in the details.

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
<b>First National Bank</b> Name of Financial Institution	XXXX- _ _ _ _	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	<u>1/2019</u>	<u>\$0.00</u>
Number Street				
<b>Houston TX</b> City State ZIP Code				

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No  
☐ Yes. Fill in the details.

### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

### Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No  
☐ Yes. Fill in the details below.

### Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Michael Stumps** \_\_\_\_\_  
 Michael Stumps, Debtor 1

**X /s/ Maichia Jackson Stumps** \_\_\_\_\_  
 Maichia Jackson Stumps, Debtor 2

Date 06/04/2019

Date 06/04/2019

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No  
☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Fill in this information to identify your case:**

Debtor 1	<b>Michael</b>		<b>Stumps</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maichia</b>	<b>Jackson</b>	<b>Stumps</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>SOUTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 108

**Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Hold Secured Claims**

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

**Identify the creditor and the property that is collateral****What do you intend to do with the property that secures a debt?****Did you claim the property as exempt on Schedule C?**

Creditor's name: **American Credit Acceptance**

Description of property securing debt: **2015 Hyundai Santa Fe**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☒ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☒ Yes

Creditor's name: **Loandepot.com, Llc**

Description of property securing debt: **22915 Gentle Shadow Dr.**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☒ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☒ Yes

Debtor 1 **Michael Stumps**  
 Debtor 2 **Maichia Jackson Stumps**

Case number (if known) \_\_\_\_\_

### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

### Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

**X /s/ Michael Stumps** \_\_\_\_\_  
 Michael Stumps, Debtor 1

**X /s/ Maichia Jackson Stumps** \_\_\_\_\_  
 Maichia Jackson Stumps, Debtor 2

Date **06/04/2019** \_\_\_\_\_  
 MM / DD / YYYY

Date **06/04/2019** \_\_\_\_\_  
 MM / DD / YYYY

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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### This notice is for you if:

- **You are an individual filing for bankruptcy,**  
and
- **Your debts are primarily consumer debts.**  
*Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

**You should have an attorney review your decision to file for bankruptcy and the choice of chapter.**

### Chapter 7: Liquidation

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	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form--sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

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## Chapter 11: Reorganization

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	\$1,167	filing fee
+	\$550	administrative fee
	<hr/>	
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.



### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

[http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

### **Bankruptcy crimes have serious consequences**

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together--called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html).

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

In re **Michael Stumps**  
**Maichia Jackson Stumps**

Case No. \_\_\_\_\_

Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....Fixed Fee:	<u><b>\$999.00</b></u>
Prior to the filing of this statement I have received.....	<u><b>\$999.00</b></u>
Balance Due.....	<u><b>\$0.00</b></u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**06/04/2019**

*Date*

**/s/ Christopher Morrison**

*Christopher Morrison*

Christopher Todd Morrison, P.C.

1306 Dorothy Street

Houston, TX 77008

Phone: (713) 863-1001 / Fax: (713) 863-0024

Bar No. 24010250

**/s/ Michael Stumps**

*Michael Stumps*

**/s/ Maichia Jackson Stumps**

*Maichia Jackson Stumps*

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

IN RE: **Michael Stumps**  
**Maichia Jackson Stumps**

CASE NO

CHAPTER **7**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 6/4/2019

Signature /s/ Michael Stumps  
*Michael Stumps*

Date 6/4/2019

Signature /s/ Maichia Jackson Stumps  
*Maichia Jackson Stumps*

Christopher Morrison, Bar No. 24010250  
 Christopher Todd Morrison, P.C.  
 1306 Dorothy Street  
 Houston, TX 77008  
 (713) 863-1001  
 Attorney for the Petitioner

# UNITED STATES BANKRUPTCY COURT FOR THE

SOUTHERN DISTRICT OF TEXAS

HOUSTON DIVISION

In re:

Case No.:

**Michael Stumps**

SSN: xxx-xx-9893

**Maichia Jackson Stumps**

SSN: xxx-xx-3749

Debtor(s)

## Numbered Listing of Creditors

Address:

**22915 Gentle Shadow Dr.  
 Hockley, TX 77447**

Chapter: **7**

	Creditor name and mailing address	Category of claim	Amount of claim
1.	A-1 Premium Acceptance 8304 Wornall Rd Kansas City, MO 64114	Unsecured Claim	\$0.00
2.	ABC Home & Commercial Services PO Box 670389 Dallas, TX 75267-0389	Unsecured Claim	\$0.00
3.	Ace Cash Express 1231 Greenway Plaza #700 Irving, TX 75038	Unsecured Claim	\$0.00
4.	Advance America 12280 NW Freeway, Ste. E Houston, TX 77040	Unsecured Claim	\$0.00
5.	Advance America 5528 Airline Houston, TX 77076	Unsecured Claim	\$0.00
6.	Aeroflex 3165 Sweeten Creek Rd Asheville, NC 28803	Unsecured Claim	\$7,747.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
7.	Affinity Med Assoc 3 Maryland Farms Ste 250 Brentwood, TN 37027-5053	Unsecured Claim	\$149.00
8.	Affirm Inc 650 California St Fl 12 San Francisco, CA 94108 VGD2B4KS	Unsecured Claim	\$213.00
9.	Akron Billing 2620 Ridewood Rd Ste 300 Akron, OH 44313-3527	Unsecured Claim	\$0.00
10.	Alliance One PO Box 5818 Trenton, NJ 08638-0818	Unsecured Claim	\$0.00
11.	Alliance One PO Box 3100 Southeastern, PA 19398-3100	Unsecured Claim	\$0.00
12.	AMCA Collection Agency 2269 S Saw Mill River Rd Elmsford, NY 10523	Unsecured Claim	\$0.00
13.	America Profit Recovery 34405 W. 12 Mile Rd Ste 379 Farmington, MI 48331	Unsecured Claim	\$231.00
14.	America's Best PO Box 934802 Atlanta, GA 31193-4802	Unsecured Claim	\$0.00
15.	American Credit Acceptance 961 E Main St Spartanburg, SC 29302 47200163152121001	Secured Claim	\$20,155.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
16.	Americollect 1851 S. Alverno Rd Manitowoc, WI 54221	Unsecured Claim	\$0.00
17.	Antwar Harrell 11550 Louetta Ste 1200 Houston, TX 77070	Unsecured Claim	\$408.00
18.	ARM Solutions Inc PO Box 3666 Camarillo, CA 93011-3666	Unsecured Claim	\$0.00
19.	Bank Pass Po Box 30069 Austin, TX 78703	Unsecured Claim	\$125.00
20.	Bastion Funding TX LLC 2802 N. Shepherd Dr Ste 200 Houston, TX 77008	Unsecured Claim	\$0.00
21.	Beckett & Lee PO Box 3001 Malvern, PA 19355-3001	Unsecured Claim	\$0.00
22.	Bonded Collections of Tucson 5447 5th St Ste 110 Tucson, AZ 85711-2345	Unsecured Claim	\$0.00
23.	Capital Med Management Group PO Box 4897 Houston, TX 77210-4897	Unsecured Claim	\$0.00
24.	Capital One PO Box 85184 Richmond, VA 23285-5184	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
25.	Capital One Bank Usa N Po Box 30281 Salt Lake City, UT 84130 5178059856930319	Unsecured Claim	\$583.00
26.	Cash Factory USA 6965 Rainbow Blvd Ste 130 Las Vegas, NV 89118	Unsecured Claim	\$0.00
27.	Cash Store 1901 Gateway Dr., Ste 200 Irving, TX 75038	Unsecured Claim	\$0.00
28.	Cashnet USA 200 W. Jackson Blvd. 14th Floor Chicago, IL 60606-6941	Unsecured Claim	\$0.00
29.	Castle Dental PO Box 52858 Irvine, CA 92619	Unsecured Claim	\$0.00
30.	Castle Dental 6831 Highway 6 North Houston, TX 77084	Unsecured Claim	\$0.00
31.	Cb Indigo/gf Po Box 4499 Beaverton, OR 97076 5100040019455199	Unsecured Claim	\$425.00
32.	CBCS 250 East Towne St Columbus, OH 43215	Unsecured Claim	\$0.00
33.	CBHV PO Box 3495 Toledo, OH 43607	Unsecured Claim	\$0.00



in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
34.	CBHV PO Box 831 Newburgh, NY 12551-0831	Unsecured Claim	\$0.00
35.	Check n Go 7755 Montgomery Rd., Ste 400 Cincinnati, OH 45236	Unsecured Claim	\$0.00
36.	Clinical Pathology Lab. PO Box 141669 Austin, TX 78714-1669	Unsecured Claim	\$0.00
37.	Cognical Inc 151 West 25th St 9th Floor New York, NY 10001	Unsecured Claim	\$0.00
38.	Comenitybank/palaisryl Po Box 182789 Columbus, OH 43218 5856373980080902	Unsecured Claim	\$0.00
39.	Cons PO Box 815867 Dallas, TX 75234-5867	Unsecured Claim	\$0.00
40.	Convergent Outsourcing Po Box 9004 Renton, WA 98057	Unsecured Claim	\$0.00
41.	Coram, Inc. PO Box 809271 Chicago, IL 60680	Unsecured Claim	\$624.00
42.	Cottonwood Financial 1901 Gateway Dr., Ste 200 Irving, TX 75038	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
43.	Credit Collection Serv 725 Canton Street Norwood, MA 02062	Unsecured Claim	\$0.00
44.	Credit Collection Services PO Box 61295 Savanah, GA 31420-1295	Unsecured Claim	\$0.00
45.	Credit One Bank Na Po Box 98872 Las Vegas, NV 89193 4447962437652252	Unsecured Claim	\$581.00
46.	CSG Nationwide Inc PO Box 21031 Tulsa, OK 74121-1031	Unsecured Claim	\$0.00
47.	Cypress Dental Group 17814 Spring Cypress Road Cypress, TX 77429	Unsecured Claim	\$0.00
48.	Cypress Dentistry Group 9727 Barker Cypress Rd Ste 600 Cypress, TX 77433	Unsecured Claim	\$1,085.00
49.	Dial Adjustment Bureau/A Division of 960 Macarthur Blvd. Mahwah, N.J. 07495-0011	Unsecured Claim	\$0.00
50.	Diversified Consultants, Inc. PO Box 551268 Jacksonville, FL 32255	Unsecured Claim	\$0.00
51.	Dt Credit Co PO Box 29018 Phoenix, AZ 85038-9018	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
52.	Dynamic Recovery 2629 Dickerson Pk Carrollton, TX 75007	Unsecured Claim	\$0.00
53.	Dynamic Recovery Services 4101 McEwen Rd Ste 150 Farmers Branch, TX 75244	Unsecured Claim	\$0.00
54.	Emblem Credit Card 16 McLeland Road Saint Cloud, MN 56303	Unsecured Claim	\$0.00
55.	FC&A 103 Clover Green Peachtree, GA 30269	Unsecured Claim	\$0.00
56.	Financial Corportation of America PO Box 203600 Austin, TX 78720-3600	Unsecured Claim	\$0.00
57.	First Access PO Box 5220 Sioux Falls, SD 5117	Unsecured Claim	\$0.00
58.	First Cash Advance 21327 North Freeway, Suite B Spring, TX 77388	Unsecured Claim	\$0.00
59.	First Cash Financial Services 690 East Lamar Blvd., Suite 400 Arlington, Texas 76011	Unsecured Claim	\$0.00
60.	First National Collection Bureau, Inc 610 Waltham Way Sparks, NV 89434	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
61.	First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107 5178006555045808	Unsecured Claim	\$421.00
62.	First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107 5178006663341487	Unsecured Claim	\$350.00
63.	Genesis FS Card Services PO Box 23039 Columbus, GA 31902	Unsecured Claim	\$0.00
64.	Gentle Dental Care 18252 FM 1488 St 120 Magnolia, TX 77354	Unsecured Claim	\$75.00
65.	Gevalia PO Box 6276 Dover, DE 19905	Unsecured Claim	\$21.00
66.	GEXA Energy 20 Greenway Plaza, Ste 600 Housotn, TX 77046	Unsecured Claim	\$0.00
67.	GEXA Energy PO Box 660100 Dallas, TX 75266-0100	Unsecured Claim	\$0.00
68.	Global Receivables Solutions, Inc. PO Box 790113 St. Louis, MO 63179-0113	Unsecured Claim	\$0.00
69.	Harrold Willis 605 Hoderrieth Blvd Tomball, TX 77375	Unsecured Claim	\$38.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
70.	Harvest Associates, Inc. PO box 204778 Augusta, GA 30917	Unsecured Claim	\$0.00
71.	HCTRA- Violations Dept 11 PO Box 4440 Houston, TX 77210-4440	Unsecured Claim	\$0.00
72.	Hometown Pest Defense 10920 W Sam Houston Pkwy Ste 500 Houston, TX 77064	Unsecured Claim	\$151.00
73.	Houston Methodist PO Box 3133 Houston, TX 77253-3133	Unsecured Claim	\$1,285.00
74.	Houston Radiology Assoc. PO Box 4346 Dept. 488 Houston, TX 772104346	Unsecured Claim	\$0.00
75.	Hughes, Waters, & Askanase LLP 1201 Louisiana, 28th Floor Houston, TX 77002	Unsecured Claim	\$0.00
76.	Id & TMS PA 1025 Louetta Rd #B Houston, TX 77070-1149	Unsecured Claim	\$0.00
77.	Inpatient Consultants of TX 4545 Post Oak Place Dr #130 Houston, TX 77027	Unsecured Claim	\$0.00
78.	Integrity Funding 84 Villa Rd Greenville, SC 29615	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
79.	IPC of Texas PO Box 92729 Los Angeles, CA 90009	Unsecured Claim	\$0.00
80.	IRS 1919 Smith Street, STOP 5024 HOU Houston, TX 77002	Unsecured Claim	\$0.00
81.	IRS PO Box 1214 Charlotte, NC 28201	Unsecured Claim	\$0.00
82.	IRS Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346	Unsecured Claim	\$17,855.00
83.	JC Christensen & Ass. PO Box 1335 Buffalo, NY 14240-1335	Unsecured Claim	\$0.00
84.	JC Christensen & Assoc PO Box 519 Sauk Rapids, MN 56379-0519	Unsecured Claim	\$0.00
85.	Juan R Amell MD PO Box 4897 Houston, TX 77210	Unsecured Claim	\$0.00
86.	Kelsey Seybold 2727 W. Holcombe Blvd 4th Fl Houston, TX 77025	Unsecured Claim	\$0.00
87.	Kelsey Seybold Clinic 8900 Lakes at 610 Dr Houston, TX 77054	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
88.	LCA Collections PO Box 2240 Burlington, NC 27216-2240	Unsecured Claim	\$0.00
89.	Life Watch 10255 W Higgins Rd Rosemont, IL 60018-5606	Unsecured Claim	\$0.00
90.	Linebarger, Goggan, Blair et al 1301 Travis St., Ste 145 Houston, TX 77002	Unsecured Claim	\$0.00
91.	Loan Star Heart and Vas Cntr 425 Holderrieth Blvd Ste 212 Tomball, TX 77375	Unsecured Claim	\$0.00
92.	Loandepot.com, Llc 4800 N. Scottsdale Road Scottsdale, AZ 85251 3000066540402	Secured Claim	\$237,418.00
93.	Lonestar Radiology 800 Rockmead Dr. #210 Kingwood, TX 77339	Unsecured Claim	\$0.00
94.	McCarthy, Burgess & Wolff 26000 Cannon Rd Cleveland, OH 44146	Unsecured Claim	\$0.00
95.	Memorial Herman Health Care ER PO Box 842355 Dallas, TX 75284-2355	Unsecured Claim	\$0.00
96.	Memorial Hermann PO Box 4370 Houston, TX 77210-4370	Unsecured Claim	\$28.00

in re: **Michael Stumps**

Debtor		Case No. (if known)
Creditor name and mailing address	Category of claim	Amount of claim
97. Memorial Pathology Cons PO Box 910 Greenville, TX 75403-0910	Unsecured Claim	\$0.00
98. Memorial Radiology Associates PO Box 200439 Houston, TX 77216-0439	Unsecured Claim	\$0.00
99. Methodist Emergency Hopsital 27560 US 290 Frontage Rd Cypress, TX 77443	Unsecured Claim	\$450.00
100. Methodist Pathology Assoc PO Box 4701 Houston, TX 77210	Unsecured Claim	\$0.00
101. Metram Rao MD 17200 Red Oak Dr #107 Houston, TX 77090	Unsecured Claim	\$219.00
102. Michael G. Casagrande MD PA 506 Graham Dr Ste 290 Tomball, TX 77375	Unsecured Claim	\$0.00
103. Mid America Bank PO Box 89210 Sioux Falls, SD 57109	Unsecured Claim	\$0.00
104. Midland Credit Management, Inc. Dept 8870 Los Angeles, CA 90084-8870	Unsecured Claim	\$0.00
105. Midland Credit Management, Inc. 2365 Northside Dr. Suite 300 San Diego, CA 92108	Unsecured Claim	\$0.00



in re: **Michael Stumps**

Debtor		Case No. (if known)
Creditor name and mailing address	Category of claim	Amount of claim
106. Millen Phys Assoc Primary Care 451 Kingwood Med Dr Suite 200 Kingwood, TX 77339	Unsecured Claim	\$0.00
107. Miral Patel 11550 Louetta Ste 1200 Houston, TX 77070	Unsecured Claim	\$0.00
108. Mohsen Arani 506 Graham Dr #120 Tomball, TX 77375	Unsecured Claim	\$0.00
109. National Asset Recovery Serv. PO Box 701 Chesterfield, MO 63006-0701	Unsecured Claim	\$0.00
110. National Credit Adjusters PO Box 3023 Hutchinson, KS 67504	Unsecured Claim	\$0.00
111. National Vision Inc PO Box 934802 Atlanta, GA 31193	Unsecured Claim	\$0.00
112. Nelnet Lns Po Box 1649 Denver, CO 80201 91599	Unsecured Claim	\$68,948.00
113. Nelnet Loan Services PO Box 2970 Omaha, NE 68103-2970	Unsecured Claim	\$0.00
114. Nelnet Loan Services 3015 S Parker Rd Ste 400 Aurora, CO 80014	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
115.	Neptune Emerg. Services PO Box 4804 Houston, TX 77210-4804	Unsecured Claim	\$0.00
116.	North Shore Agency PO Box 8999 Westbury, NY 11590-5591	Unsecured Claim	\$0.00
117.	NPAS Solutions, LLC PO Box 33188 Louisville, KY 40232	Unsecured Claim	\$0.00
118.	Orkin Pest Control 13022 Kathy Lane Cypress, TX 77429-5100	Unsecured Claim	\$0.00
119.	PFS Group 2600 North Loop West, Ste 150 Houston, TX 77092	Unsecured Claim	\$0.00
120.	PFS Group PO Box 4288 Houston, TX 77210-4288	Unsecured Claim	\$0.00
121.	Phoenix Financial Services LLC PO Box 26580 Indianapolis, IN 46226-0580	Unsecured Claim	\$0.00
122.	Physicians Group of the Woodlands PO Box 14099 Belfast, ME 04915	Unsecured Claim	\$0.00
123.	Portfolio Recov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502 5178057531447022	Unsecured Claim	\$2,013.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
124.	Portfolio Recov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502 4003448221351182	Unsecured Claim	\$1,442.00
125.	Prestine OB Gyn Care 13523 Hargrave Rd Houston, TX 77070	Unsecured Claim	\$98.00
126.	Professional Acct Serv. PO Box 188 Brentwood, TN 37024-0188	Unsecured Claim	\$0.00
127.	Professional Bureau of Collections of Maryland, Inc. PO Box 628 Elk Grove, CA 95759-0628	Unsecured Claim	\$0.00
128.	Progressive Leasing 10619 S Jordan Gateway Ste 100 S Jordan, UT 84095	Unsecured Claim	\$0.00
129.	Publishers Clearinghouse 382 Channel Dr Port Washington, NY 11050	Unsecured Claim	\$0.00
130.	Quest Diagnostice Inc. PO Box 740698 Cincinnati, OH 45274-0698	Unsecured Claim	\$0.00
131.	Quest Diagnostics, Inc. P.O. Box 41652 Philadelphia, PA 19101-1652	Unsecured Claim	\$0.00
132.	Radiant PO Box 1183 Lac DU Flameau, WI 54538	Unsecured Claim	\$1,396.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
133.	Receivable Solution PO Box 669 Natchez, MS 39121	Unsecured Claim	\$63.00
134.	Red Oak Cardiovascular 17200 Red Oak Dr. #107 Houston, TX 77090	Unsecured Claim	\$0.00
135.	ReflexPO Box 3220 Buffalo, NY 14240	Unsecured Claim	\$0.00
136.	Rise Credit 4150 International Plaza Ste 400 Fort Worth, TX 76109	Unsecured Claim	\$0.00
137.	Rodale Books 400 South 10th Street Emmaus, PA 18098	Unsecured Claim	\$0.00
138.	Rollins Service Bureau PO Box 13230 Atlanta, GA 30324	Unsecured Claim	\$0.00
139.	Rosenthal, Morgan & Thomas 12747 Olive Blvd. Suite 375 St Louis, MO 63141	Unsecured Claim	\$0.00
140.	Safeco Insurance Co PO Box 5687 Denver, CO 80217	Unsecured Claim	\$0.00
141.	Sears/cbna Po Box 6217 Sioux Falls, SD 57117 504994808319	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
142.	Sentry Credit Inc 2809 Grand Ave. Everett, WA 98201	Unsecured Claim	\$0.00
143.	Seventh Ave PO Box 2804 Monroe, WI 53566	Unsecured Claim	\$0.00
144.	Seventh Avenue 1112 7th Ave Monroe, WI 53566 2238797600570	Unsecured Claim	\$0.00
145.	Shop Now PO Box 2852 Monroe, WI 53566	Unsecured Claim	\$0.00
146.	Skoro Enterprise PO Box 670221 Dallas, TX 75267	Unsecured Claim	\$0.00
147.	Snap Finance PO Box 26561 Salt Lake City, UT 84126	Unsecured Claim	\$0.00
148.	Specialized Collection System, Inc PO Box 441508 Houston, TX 77244-1508	Unsecured Claim	\$0.00
149.	Speedy Cash 8400 E. 32nd Stree N. Wichita, KS67226	Unsecured Claim	\$0.00
150.	Stella Dental 7160 Barker Cypress Rd Suite E Cypress, TX 77443	Unsecured Claim	\$1,500.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
151.	Sunrise Credit Services P.O Box 9100 Farmingdale, NY 11735-9100	Unsecured Claim	\$0.00
152.	Surgical Advanced Specialty Center 455 School St. Suite 10 Tomball, TX 77375	Unsecured Claim	\$0.00
153.	Syncb/chevron P.o Box 965015 Orlando, FL 32896 7061592010621008	Unsecured Claim	\$58.00
154.	Synchrony Bank PO Box 960061 Orlando, FL 32896-0061	Unsecured Claim	\$0.00
155.	T-Mobile PO Box 742596 Cincinnati, OH 45274	Unsecured Claim	\$0.00
156.	Tbom/total Crd Po Box 85710 Sioux Falls, SD 57118 4317320202540581	Unsecured Claim	\$344.00
157.	Tejas Pathology PO Box 1568 Tomball, TX 77377	Unsecured Claim	\$0.00
158.	Texas Workforce Commission PO Box 149080 Austin, TX 78714-9080	Unsecured Claim	\$392.00
159.	The Heights of Tomball 27840 Johnson Rd Tomball, TX 77375	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
160.	Tomball Clinical Lab PO Box 1400 Greenville, TX 75403	Unsecured Claim	\$0.00
161.	Tomball Clinical Lab PO Box 2050 Nederland, TX 77267	Unsecured Claim	\$0.00
162.	Tomball Reg Emerg Phys 605 Holderrieth Blvd Tomball, TX 77375	Unsecured Claim	\$0.00
163.	Tomball Regional Hospital 75 Remittance Dr Dept 6479 Chicago, IL 60675-6479	Unsecured Claim	\$0.00
164.	Tomball Regional Med Center PO Box 845933 Dallas, TX 75284-5933	Unsecured Claim	\$0.00
165.	Total Customers Services 1510 East 112nd St Burnsville, MN 55337	Unsecured Claim	\$0.00
166.	Transworld System 1611 West Country Rd B, Ste. 307 Roseville, MN 55113	Unsecured Claim	\$0.00
167.	Transworld Systems 507 Prudential Road Horsham, PA 19044	Unsecured Claim	\$0.00
168.	Trepa, PA PO Box 25131 Fort Worth, TX 76124-2131	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
169.	Tri State Funding, LLC PO Box 561183 Dallas, TX 75356	Unsecured Claim	\$0.00
170.	Tri-State Adjustments PO Box 3219 La Crosse, WI 54602	Unsecured Claim	\$0.00
171.	Trugreen PO Box 78611 Phoenix, AZ 85062-8611	Unsecured Claim	\$0.00
172.	TWC Revenue and Trust Management PO Box 149352 Austin, TX 78714	Unsecured Claim	\$0.00
173.	TX Tag PO Box 650749 Dallas, TX 75265-0749	Unsecured Claim	\$73.00
174.	Uncle Warbucks P.O. Box 1469 Kahnawake, Quebec J0L 1B0	Unsecured Claim	\$0.00
175.	Uncle Warbucks Loans 20 3 NE Front St Ste 101 Milford Kent, DE 19963	Unsecured Claim	\$0.00
176.	Unified Asset Solutions PO Box 1098 Buffalo, NY 14226	Unsecured Claim	\$0.00
177.	United Recovery Systems Inc PO Box 722929 Houston, TX 77272-2929	Unsecured Claim	\$0.00



in re: **Michael Stumps**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
178.	United Recovery Systems, Inc. 3100 S. Gessner, Ste 400 Houston, TX 77063	Unsecured Claim	\$0.00
179.	Verizon Wireless Po Box 650051 Dallas, TX 75265 22449443300001	Unsecured Claim	\$783.00
180.	Verizon Wireless PO Box 660108 Dallas, TX 75266-0108	Unsecured Claim	\$0.00
181.	Verizon Wireless 500 Tech Dr Ste 550 Wedon Spring, MO 63304	Unsecured Claim	\$0.00
182.	Virtuoso Sourcing Group PO Box 5818 Denver, CO 80217	Unsecured Claim	\$0.00
183.	Webbank/fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303 6369921048526247	Unsecured Claim	\$0.00
184.	Webbnk/fhut 6250 Ridgewood Road Saint Cloud, MN 56303 6276456033256387	Unsecured Claim	\$0.00
185.	Wells Fargo Bank Credit Bureau Dispute Resoluti Des Moines, IA 50306 4426441042406847	Unsecured Claim	\$652.00
186.	Wellshire Financial Services 27704 State Highway 249 Tomball, TX 77375	Unsecured Claim	\$0.00

in re: **Michael Stumps**

Debtor

Case No. (if known)

187. Willowbrook Cardiovascular Assoc  
PO Box 202530  
Austin, TX 78720

Unsecured Claim

\$0.00

(The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.)

### DECLARATION

I, **Michael Stumps**,  
named as debtor in this case, declare under penalty of perjury that I have read the foregoing *Numbered Listing of Creditors*,  
consisting of 22 sheets (including this declaration), and that it is true and correct to the best of my information and belief.

Debtor: /s/ Michael Stumps Date: 6/4/2019  
**Michael Stumps**

Spouse: /s/ Maichia Jackson Stumps Date: 6/4/2019  
**Maichia Jackson Stumps**